

Transboundary Spill NPDES CA0108928 Order No. R9-2014-0009, Amended by R9-2014-0094

Type   A     x     B  

(CAL OES 1-800-852-7550)

Name of Person Reporting Spill Steven Smullen

Telephone No. of Person Reporting 619-662-7601

Spill Location/Name Goat Canyon at the International Border

GPS Coordinates 32.32.6N, 117.6.10 W

Spill Reached:    Drainage Channel   X   Drainage Structure    Surface Water

Spill Reached:    MS4 MS4 Owner   

Vol Spill to MS4    Vol Recovered from MS4   

Estimate Spill Volume from All Sources 0.645 million gallons (MG)   

Volume That Reached: Surface Water, Drainage Channel, Not Recovered from MS4 0.645 MG   

Total Recovered Volume 0

Number of Spill Appearance Points 1

Appearance Descriptions clear water, appears non sewage in origin

Spill Flow: Start Date 4/30/17 Start Time 1630

Notification: Date 4/30/17 Time 2220

Operator Arrival: Date unk Time unk

Spill Flow: End Date 5/1/17 End Time 1300

Cleanup Completed: Date N/A Time   

Probable Cause of Spill Broken pipe just west of Las Laureles Canyon

Notification of CAL OES Date 5/2/17 Time 1500

CAL OES Control Number 17-3179 Reina Laroa   

Description of Spill Flow Destination Goat Canyon Sed Basins, Border Field Park Access Rd

Spill Flow Cause unk

Spill Flow Failure Point Goat Canyon

Spill Flow Storm Event N/A

Spill Corrective Actions None

Spill Flow Response Actions None

Spill Flow Completion Date 5/1/17

Investigation N/A Reasons    Completion Date   

Health Warnings Posted    Yes   x   No

Name of Beaches Impacted: None Surface Water Impacted: None

Location and No. Of Samples Collected (Type A) N/A Number   

Parameters Tested: by Regional Board 5/1/17 E.coli -898 MPN/100 ml, total coliform-54,750

MPN/100ml   

Regulatory Agencies Receiving Results Regional Board, CBP, USIBWC

Methodology for Spill Volume Estimate Estimated from flow, 500 gpm for 21.5 hours

Amount of Spill Recovered None

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Certifying Official Steven Smullen Title Area Operations Manager Date 5/5/17

Signature 